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CONFIRMATION NO. 6734

SERIAL NUMBER 10/665,784	FILING DATE 09/19/2003  RULE	CLASS 702	GROUP ART UNIT 2863	ATTORNEY DOCKET NO. STL11057					
APPLICANTS Thomas H. Chuang, Longmont, CO; <span style="float: right;">TL</span>  ** CONTINUING DATA ***** <span style="float: right;">u</span>  ** FOREIGN APPLICATIONS ***** <span style="float: right;">u</span>									
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/11/2003									
<table style="width: 100%; border: none;"> <tr> <td style="width: 45%; border: none;">           Foreign Priority claimed  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no            35 USC 119 (a-d) conditions met  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance            Verified and Acknowledged            Examiner's Signature <u>TL</u> Initials <u>TL</u> </td> <td style="width: 15%; border: none; text-align: center; vertical-align: top;">           STATE OR            COUNTRY            CO         </td> <td style="width: 15%; border: none; text-align: center; vertical-align: top;">           SHEETS            DRAWING            5         </td> <td style="width: 15%; border: none; text-align: center; vertical-align: top;">           TOTAL            CLAIMS            16         </td> <td style="width: 10%; border: none; text-align: center; vertical-align: top;">           INDEPENDENT            CLAIMS            2         </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <u>TL</u> Initials <u>TL</u>	STATE OR COUNTRY CO	SHEETS DRAWING 5	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
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ADDRESS Fellers, Snider, Blankenship, Bailey & Tippens, P.C. Bank One Tower 100 North Broadway, Suite 1700 Oklahoma City, OK 73102-8820									
TITLE Vibration measurement apparatus and method									
FILING FEE  RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees ( Filing )</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees ( Issue )</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____
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